DATE:

STATE OF CALIFORNIA DEPARTMENT OF PERSONNEL ADMINISTRATION

ESTABLISHING REEMPLOYMENT LISTS

DPA	1-016 (KEVISEL	J 3/98)					
1.	TO: FROM:	STATE PERSONNEL BOARD 801 CAPITOL MALL SACRAMENTO, CA 94244-20' ATTN: CERTIFICATION UNIT NAME:		2.	EMPLOYEE TO NAME:	TO BE PLACED ON LIST	
		DEPT:			MAILING ADI	DRESS:	
		TELE:			TELE:		
3.	CLASS TITLE				CLASS CODE	SENIORITY SCORE	TIE SCORE SEQ.
(CL	ASS LEAVING ON	ILY)					
<u></u>	TYPE OF DEE	EMDI OVMENT I ISTS (CHECK T	THE ADDDODDIATE BOYES)				
+.	TYPE OF REEMPLOYMENT LISTS (CHECK THE APPROPRIATE BOXES) (C) SRL (subdivision)						
	— (0) ONE (_(department)				
	(F) DRL (department)						
5.	(H) GRL (all departments) EFFECTIVE DATE IF REEMPLOYMENT LIST ELIGIBILITY						
 6.	REEMPI OVM	ENT LIST TIME RASE ELIGIRILI	TV				
J.	REEMPLOYMENT LIST TIME BASE ELIGIBILITY FULL TIME PART TIME AND INTERMITTENT ONLY						
7.	TYPE OF ACTION PLACING EMPLOYEE ON LIST MANDATORY PLACEMENT PERMISSIVE PLACEMENT SPB PLACEMEN						
	S30 TERM	//INATION (19997.11)	S02 IN LAYOFF SITUATI	ION		N LIEU OF INVOLUNTARY RANSFER	19253.5
		OTION IN LEU OF MINATION (19997.11)	S01 RESIGNATION (189	03-0	•	RETIRED IN LIEU OF AYOFF	19050.7
	A11 INVOLUNTARY REASSIGNMENT A02 VOLUNTARY DEMOTION (18903-04) (19997.8)						19141
	A03 CEA (19889.3) A02 TRANSFER-SAME CLASS						19062
			A02 TRANSFER-DIFFER	RENT	Γ CLASS		RULE 548.153
3.	EMPLOYEE CONDITIONS OF EMPLOYMENT PREFERENCE 9. LOCATION(S)						
	PERMANENT						
	П темроя	RARY PART TIME	INACTIVE				
(SP	B use) CERTIF	ICATION	:	SIGN	NATURE OF ORIGI	NATOR	

DATE SENT TO SPB